PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Ellective October 1, 2003									·		- ()	:>-
						SM (Column 2) TY			NTITY	OR	OTHE	THAN ENTITY
	TOTAL CLAIM	, .					RATE	FEE	7	RATE	FEE	
FOR			NUMBEI	NUMBER FILED		NUMBER EXTRA		SIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			minus 20=		*		} >	(S 9=		OR	XS18=	
INDEPENDENT CLAIMS			minus 3 =		*			(43=		OR	X86=	
M	ULTIPLE DEPE	ENDENT CLAIM I	PRESENT	RESENT				145=		-	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2							<u> </u>	OTAL.		JOR OR	TOTAL	
CLAIMS AS AMENDED - PART II								JIAL		104		THAN
	· · · · · · · · · · · · · · · · · · ·	nn 2)	(Column 3)	SI	/ALL	ENTITY	OR		ENTITY			
AMENDMENT A	<i>C</i>	CLAIMS REMAINING AFTER AMENDMENT		PREVIO PAID F	BER USLY	PRESENT: CXTRA	·R	ΛΤΕ	ADDI TIONAL FEE		RATE	ADDI TIONAL FEE
	Total	· 35	Minus	- 90	7	, —	×	\$ 9=		OR	X\$18=	
	Independent	1. 4	Minus	4	/ 	=	×	43≔		OR	X86=	
_	FIRST PRESENTATION OF MULTIPLE DEF			PENDENIT	CLAIM			45= -		OR	+290=	. · · · · · · · · · · · · · · · · · · ·
						,		TOTAL T FEE		OR	TOTAL ADDIT: FEE	
	(Column 1) (Column 2) (Column 3)							, , , , ,		.		
AMENOMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USL:	PRESENT EXTRA	R/	XTE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**			XS			OR	X\$18=	
	Independent	*	Minus	***		=	X	13=	u ₄ 1	OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1 1	. 200	
			•				· L	45.= 01al		OR.	+290≕ TOTAL	
	(Column 1)					1	ADDI			OR.	ADDIT FEE	· · · · · · · · · · · · · · · · ·
	(Column 1)			(Colum HIGHE	ST	(Column 3)		·	ALICH	! 「		4551
AMEN		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	JSLY	PRESENT EXTRA	RA	TE	AUDI- TIONAL : FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	·	=	X\$	9=		OR	X\$18=	
	Independent	*	Minus	***		=	X	3=			X86=	·
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							-		OR		 · · · · · · · · · · · · · · · · · ·
• 11	 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. 									OR	+290=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												